

SAFE DRINKING WATER STATE REVOLVING FUND ENVIRONMENTAL INFORMATION FORM

(To be completed by applicant – attach additional sheets as needed)

General Information

1. Name of project:
2. Safe Drinking Water State Revolving Fund project number:
3. Name of applicant or project sponsor:
Address:
City: _____ Zip: _____
4. Name of contact person for this project:
Address:
City: _____ Zip: _____ Phone Number: _____
5. Address of project:
6. Latitude and longitude of project:
or section, township, range, base and meridian:
7. Existing zoning at project site:
8. List and describe any other related permits and other public approvals required for this project, including those required by city, regional, state and federal agencies:
9. Is the site on or next to a designated scenic highway? ☐ yes ☐ no ☐ unknown
10. Describe the existing system (if present)
 - a. Area of treatment facilities: _____ acres. Service area: _____ sq. mi.
 - b. Number of service connections:
 - c. Source information:
 - (1) Groundwater (well capacity):
 - (2) Surface water:
 - (3) Connections with other systems:
 - (4) Emergency connection:
 - d. Treatment:
 - e. Storage facilities
 - (1) Tanks (physical dimensions, capacity, and condition):
 - (2) Open reservoirs (surface area, capacity, and condition):
 - f. Briefly describe how water is currently transmitted from the source(s) to the treatment facilities:

- g. Briefly describe how finished water is currently transmitted from the treatment/storage facilities to consumers (distribution system):

- h. Present amount of water delivered: _____ Current demand:
- i. Water quality problems in the last 3 years:

Project Description

- 1. Describe project objectives:

- 2. Explain how objectives will be accomplished
 - a. New facilities:..... ☐ yes ☐ no
 - b. Upgrading existing facilities:..... ☐ yes ☐ no
 - c. Correction of treatment problems: ☐ yes ☐ no
 - d. Other:
- 3. Project location (description of the precise location and boundaries and/or attach topographic map and site plan if available):

- 4. Construction area: _____ acres. Additional service connections:
- 5. New source information:
 - a. Groundwater (well capacity):
 - b. Surface water:
 - c. Connections with other systems:
 - d. Emergency connection:
- 6. Facilities (indicate whether they are new, modifications, removals, or replacements.)
 - a. Treatment facilities (give size and capacities):

 - b. Storage facilities
 - (1) Tanks (physical dimensions and capacity):

- (2) Open reservoirs (surface area and capacity):
- c. Transmission facilities (give size of pumps and pipelines):
- d. Distribution facilities (give size of pumps and mains):
- e. Appurtenant structures:
- f. Parking facilities:
- g. Staging areas:
- h. Proposed lighting:
7. Will the project involve disposal of waste? ☐ yes ☐ no
a. If yes, describe the waste and state where it will be disposed:
8. Describe any grading or excavation work:
9. Will the project involve an increase in capacity? ☐ yes ☐ no
a. Amount of capacity increase:
b. Is the increase needed to serve existing development?... ☐ yes ☐ no
c. Is the increase needed to serve projected development? ☐ yes ☐ no
(1) Population basis for capacity determination (include year)
(a) Current population:
(b) Projected population:
10. If the project involves a variance, conditional use, or rezoning application, state this and indicate clearly why the application is required:
11. Proposed construction scheduling:

Environmental Setting

Include a discussion of all the following detailed elements as applicable; if an element is not present within the described area, give reasons or verify with investigative results. Consider all facilities; conveyance lines; storage, points of diversion; staging areas; and affected service area as applicable. Use attachments if necessary.

1. Topography of the region
 - a. Location of project area with regard to major topographical features:
 - b. Elevations and slopes on project site (for grading / excavation activities):
2. Land use
 - a. At project site:
 - b. Adjacent to project site:
 - c. Along pipeline alignments:
 - d. At the point of diversion:
3. Vegetation types
 - a. Natural vegetation/habitat: (% of project area):
 - b. Landscaped (% of project area):
 - c. Introduced weedy species (% of project area):
 - d. Cleared (% of project area):
 - e. Dominant plants:
 - f. Description of surrounding vegetation types:
4. Fish and wildlife (project site and surrounding area)
 - a. Dominant species:
 - b. Economically or recreationally significant species:
5. Surface water features
 - a. Lakes:
 - b. Streams:
 - c. Estuaries:
 - d. Potential wetlands:
 - e. Lagoons, marshes and other water features:
 - f. Is the project near a Wild and Scenic River? ☐ yes ☐ no ☐ unknown
6. Agricultural land on project site (acres): _____ :
 - a. Will the project convert prime farmland, unique farmland, or farmland of statewide importance? ☐ yes ☐ no ☐ unknown
7. Is the project site included on a list of hazardous material sites compiled pursuant to Government Code 65962.5? ☐ yes ☐ no ☐ unknown
8. Is the project located near an airstrip? ☐ yes ☐ no ☐ unknown
9. Historic and prehistoric archeological sites, architecture, landscapes, features, structures, or objects:

10. Traditional cultural places (e.g. sacred lands):

11. Lands within the coastal zone jurisdiction? ☐ yes ☐ no ☐ unknown
12. Lands within a floodplain? ☐ yes ☐ no ☐ unknown
13. Lands within a national forest? ☐ yes ☐ no ☐ unknown

Environmental Impacts

Are the following items known to be applicable to the project or its effects? Discuss below all items checked yes (attach additional sheets as necessary).

- | | Yes | No | |
|-----|--------------------------|--------------------------|--|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Removal of mature native/heritage trees. |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Clearing of native vegetation and/or habitat. |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Interference with or blocking wildlife migration routes. |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Effect on a special status species. |
| 5. | <input type="checkbox"/> | <input type="checkbox"/> | Interference with or substantial use of recreational facilities. |
| 6. | <input type="checkbox"/> | <input type="checkbox"/> | Change in ocean, bay, lake, or stream water quality or quantity. |
| 7. | <input type="checkbox"/> | <input type="checkbox"/> | Alteration of existing drainage patterns. |
| 8. | <input type="checkbox"/> | <input type="checkbox"/> | Change in existing features of any bays, tidelands, beaches, or hills, or substantial alteration of ground contours. |
| 9. | <input type="checkbox"/> | <input type="checkbox"/> | Substantial depletion of groundwater supplies. |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | Change in groundwater quality. |
| 11. | <input type="checkbox"/> | <input type="checkbox"/> | Loss of mineral resources. |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | Change in scenic views or vistas from existing residential areas, or public lands or roads. |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | Change in pattern, scale or character of the general project area. |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | Significant amounts of solid waste or litter. |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | Change in dust, ash, smoke, fumes, or odors in the vicinity. |
| 16. | <input type="checkbox"/> | <input type="checkbox"/> | Substantial change in noise or vibration levels in the vicinity (beyond the property line). |
| 17. | <input type="checkbox"/> | <input type="checkbox"/> | Site on filled land or on slopes of 10 percent or more. |
| 18. | <input type="checkbox"/> | <input type="checkbox"/> | Use or disposal of hazardous materials, flammables, or explosives. |
| 19. | <input type="checkbox"/> | <input type="checkbox"/> | Substantial change in demand for municipal services. |
| 20. | <input type="checkbox"/> | <input type="checkbox"/> | Substantial increase in traffic. |
| 21. | <input type="checkbox"/> | <input type="checkbox"/> | Substantial increase in fuel consumption (electricity, oil, natural gas, etc.). |
| 22. | <input type="checkbox"/> | <input type="checkbox"/> | Related to a larger project or series of projects. |

Discussion:

Describe any known potentially significant environmental effects that may result if the project is implemented (attach additional sheets as necessary):

Describe any mitigation measures that will be incorporated into the project to avoid or reduce to less-than-significant any impacts described above (attach additional sheets as necessary):

Certification

I hereby certify that the statements furnished above and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief.

Signature: _____

Date:

Name:

Position: